

North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Inactive Status

This certification is used by Candidate, Party, PACs and Referendum Committees to declare their intent to be inactive, which is not raising or spending any money on behalf of the campaign

FILED BY:

Treasurer Phone:

Committee Name: Merritt for School Board

Treasurer Name: Jonathan Merritt

Treasurer Address: 152 Ashbury Park Ln.

(include city, state, & zip) Richlands, NC 28574

910-330-9458

I certify that the above named candidate/political committee intends to receive no contributions, nor make any expenditures, until the committee resumes activity.

I understand that if the above circumstances change, it will be necessary for the person responsible for filing financial disclosure reports to file an amended Statement of Organization and the Certification to Return to Active Status form (CRO-3300) within ten days.

7/12/2016

Date Signed

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

Certification of Inactive Status

July 2014

CRO-3200

Disclosure Repor	rt Cover	c demonstrate	ionad and cuhi	nitted along with G	ther detailed forms.
Use this form for genera	I report and committee in	formation, must be s	igned and suo	Intiod along was	
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1. Committee Informat a, Full Name	IOII	\$1,W_513578921.0563.52830.05.07.523.530.0			c, ID Number
Merritt for School Boar	d				ZHCIS2
					d. Date Filed
b. Mailing Address (include	City, State and Zip Code)		N. N. Marie		7/12/16
152 Ashbury Park Ln. Richlands, NC 28574					
Montands, No 20074					e. Phone Number
					910-330-9458
		4. Period I	ind Date	5. Treasurer Fu	II Nama
2. Report Year 3.	Period Start Date (mm/d	d/yy) (mm/dd/yy)			
2016	03/01/2016	6/30)/2016	Jonathan A. Me	eriu :
		9. Type of Report	teheck on	l Iv one type of repo	ort from one category)
6. Type of Committee Candidate Campaign	(Check One)	Municipal	State/C		Referendum
Candidate Campaign PAC	Referendum	Organizational		Organizational	Organizational
Independent	Joint Fundraiser	Thirty-five day	,	Quarterly	Pre-referendum
Expenditure Legal Expense Fund	La.u4				
	f applicable, check one)	Pre-primary		First Second	Final Supplemental Final
Booster Fund"		Pre-election Pre-runoff		Third	Annual
Building Fund		Semi-annual		Fourth	Special
		Mid Yea	\ <u></u>	Semi-annual	10. Special Report Name
Other:		Year End	ᅵ片	Mid Year Year End	**************************************
		Final Special	片	Final	
8. Number of Fundrai	sers this Report	i special		Special	
11. Account Informat			11. Account	Information	
a. Financial Institution Full		大型。		stitution Full Name	
Woodforest National E	Bank				c, Account Code
b. Purpose	c. Account Code		b. Purpose	<u>- , , , , , , , , , , , , , , , , , , ,</u>	t, actually south
Campaign Exp	1				
	d. Period Begin Balanc	e			d. Period Begin Balance
	\$ 881.09 /				\$
	3 001.05		<u> </u>		
CERTIFICATION		ionee with all annlie	able provisions	s of Article 22A, 2	2B, & 22D-22M of Chapter 163 of
I certify that the Comm	nttee or Fund is in compi	ommingled with pro	hip ted or othe	r non-disclosed fur	nds. I further certify that this report
is complete, true and co	orrect and that I have bee	n trained by the NC	State Board of	Elegyons.	7/12/16
Jonathan A. N	lerritt	1	Signature of Appo		Date
TON OTHER OF VICE ON	Printed Name of Signer	-H	signature of Etopo	Jirou Troubego.	
FOR OFFICE USE ON		Employee			Delivery Method Normal Mail
Date Received:					Registered Mail
Date Postmarked:		Employee			Hand Delivered
	JUL 12 2016	Employee			Blectronically Filed Signer has not received
Date Scanned:		Limptoyee			mandatory training
Date Data Entered	[:	Employee			
***	1 1	mand assumittee inf	ormation such	as the committee a	ddress, treasurer, assistant treasurer,
Please Note: This	torm cannot be used to a	mend committee intellian of books information	ation, or accou	nt information.	
	You must amend the Stat				mittee changes.

Amendment

Detailed Summary

Amendment

Use this form to summarize all disclosure reporting forms and to total monetary information. 3. ID Number 2. Type of Report 1. Committee Full Name (and Fund if applicable) ZHCIS2 Second Quarter Merritt for School Board Total this Total this 2016 January 1, Election Cycle Start of Election Cycle: Reporting Period 881.09 Cash on Hand at Start RECEIPTS 300.00 \$ \$ **Aggregated Contributions from Individuals** (CRO-1205) \$ 4900.11 0 \$ (CRO-1210) Contributions from Individuals 6) \$ 0 0 (CRO-1220) \$ Contributions from Political Party Committees 7) \$ 0 0 \$ (CRO-1230) Contributions from Other Political Committees 8) \$ 0 0 \$ (CRO-1410) 9) Loan Proceeds \$ 0 \$ 0 (CRO-1240) Refunds/Reimbursements To the Committee 10) alle se estados 11) Other Receipt Sources \$ 0 (CRO-1250) 11a) Interest on Bank Accounts \$ 0 \$ 0 11b) Contributions from Not-for-Profit Organizations (CRO-1250) \$ 0 0 \$ (CRO-1250) 11c) Outside Sources of Income \$ 0 0 \$ (CRO-1270) Legal Expense Fund - Other Sources 11d) \$ 0 0 \$ (CRO-1265) 11 e) Exempt Purchase Price Sales 5200.11 \$ 0 TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e) EXPENDITURES Disbursements 4717.02 398.00 (CRO-1310) **Operating Expenditures** 13a) \$ 0 0 \$ Contributions to Candidates/Political Committees (CRO-1310) 13b) \$ 0 0 (CRO-1310) Coordinated Party Expenditures 13c) \$ 0 0 (CRO-1315) Aggregated Non-Media Expenditures 14) \$ 0 0 (CRO-1420) Loan Repayments 15) 480.00 480.00 \$ (CRO-1320) Refunds/Reimbursements From the Committee 16) 0 0 \$ (CRO-1510) **In-Kind Contributions** 17) 5197.00 878.00 \$ TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 18) 3.09 3.09 Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18) 19) ADDITIONAL INFORMATION \$ 0 (CRO-1330) Non-Monetary Gifts Given to Other Committees 20) 0 Outstanding Loans (incl. ones from other campaigns) (CRO-1430) 21) 0 (CRO-1610) Debts and Obligations owed By the Committee 22) 0 (CRO-1620) Debts and Obligations owed To the Committee 23) 0 (CRO-1720) **Account Transfers Within the Committee** 24) \$ 0 0 (CRO-1710) Administrative Support 25) \$ 0 0 \$ (CRO-1440) Forgiven Loans 26) \$ 0 0 (CRO-2200) 48-Hour Notice Reports Sum 27) \$ 0 0 (CRO-1215) Contributions to be Refunded

Disbursements			Pg	<u>1</u>	of <u>1</u>
Parametre	_	1	Cti	contri	butions to candidat

Use this form to report expenditures from the committee for; operating expenses, contributions to candidate/political committees and coordinated party expenditures.

Amendment

commuees and c	soordinated party exp	if anniaghia	ag distriction of the state of the process for	ing parties and in the later	2. ID Number
1. Committee Fi	ill Name (and Fund	it abbuganie)	<u> </u>	<u> Karanga pang terang ay ang panggang ang menapah 1,24 ka</u>	ZHCIS2
Merritt for Scho		asusa spravata C	RO-1310 forms for each ty	pe of Disburseme	nt)
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Operating Ex	The second section of the second section is a second section of the	Contributions to can	Ádd	Remove	
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(include city, state,			= 45 =		1
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Greenville, NC	2/833 .		State	Municipality:	e. Election Sum to Date
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Olision County	X.op		c. Level Registered (Specify)		
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				\$	
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6. Total of AL	L CRO-1310 Pages	D 000 11	On if Operating Expenses	(11914)11年(2018年(2019年)	
(This line goes i	n line 13a of Detailed Su	mmary Page CRO-II	00 if Operating Expenses) 00 if Contrib to Candidates/Polit	ical Comm)	\$ 398.00
(This line goes i	n line 13b of Detailed Su	mmary Page CRO-11	00 if Contrib to Candidates/Polit 00 if Coordinated Party Expendi	tures)	
(This line goes i	n tine 13c of Detailed Su	mmary Page CKO-11	00 if Coordinated Party Expendi		
	des (List detailed ex	cpenditure code if	l (fl.) above) idraising	D - To Anoth	er Candidate
A* - Media E - Salaries	B* - Printing F* - Equipmen	the state of the s	ical Party	H* - Holding	g Public Office Expenses
I - Postage	J - Penalties		ice Expenses	Q* - Donatio	on to Legal Expense Fund
O* - Other	- 1	and the second of the second	1 4 4 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
* Codes requi	re detailed explana	tion in required	remarks field (k)	Control of the Contro	Pagambar 2000

Use this form to report refunds/reimbursements, including contributions returned to the contributor. 1. Committee Full Name (and Fund if applicable) Merritt for School Board 2. ID Number PO Box 31068 3. Payee Information a. Full Name, Malling Address & Phone (include city, state, & zip) Mary Merritt 152 Ashbury Park Ln. Richlands, Ne Add Remove d. Type of Committee Candidate PAC 2/5/16 Referendum Party e. Level Registered (Specify) 1. Original Receipt Amore State Municipality: 1. Prupose Code f. Purpose Code 5. Election Sum to Date \$ 2148.81
Merritt for School Board 3. Payee Information a. Full Name, Malling Address & Phone (include city, state, & zip) Mary Merritt 152 Ashbury Park Ln. Richlands, Nc Candidate PAC Party C. Level Registered (Specify) Party County: State Municipality: f. Purpose Code S. 2148.81
3. Payee Information a. Full Name, Malling Address & Phone (include city, state, & zip) Mary Merritt 152 Ashbury Park Ln. Richlands, Nc Richlands, Nc Add Remove d. Type of Committee Candidate PAC Referendum Party e. Level Registered (Specify) I. Original Receipt Amo g. Level Registered (Specify) I. Original Receipt Amo h. Original Receipt Date Z/5/16 County: Federal County: State Municipality: f. Purpose Code \$ 2148.81
a. Full Name, Mailing Address & Phone (include city, state, & zip) Mary Merritt 152 Ashbury Park Ln. Richlands, Nc Richlands, Nc d. Type of Committee Candidate PAC 2/5/16 Referendum Party E. Level Registered (Specify) i. Original Receipt Amore Federal County: 1475.53 State Municipality: F. Purpose Code j. Election Sum to Date \$ 2148.81
(include city, state, & zip) Mary Merritt 152 Ashbury Park Ln. Richlands, Nc Richlands, Nc Candidate PAC Referendum Party e. Level Registered (Specify) Federal County: State Municipality: f. Purpose Code \$ 2148.81
Mary Merritt 152 Ashbury Park Ln. Richlands, Nc e. Level Registered (Specify) Federal County: State Municipality: f. Purpose Code f. Purpose Code s 2148.81 County: Lection Sum to Date
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State Municipality: f. Purpose Code j, Election Sum to Date \$ 2148.81
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h. Job Title/Profession c. Employer's Name/Specific Field g. Comments R. Account Code
b. Job Title/Profession c. Employer's Name/Specific Field g. Comments Restaurant Manager Cracker Barrel L
Restaurant
I. Form of Payment in. Required Remarks n. Date (mm/dd/yyyy) o. Amount
Transfer Reimbursement to Candidates Wife 3/15/2016 \$ 480.00
3. Payee Information Add Remove
g. Full Name, Mailing Address & Phone d. Type of Committee in. Original Accept But
(include city, state, & zip)
Referendum Party
e, Devel Regional (opensy)
State Municipality:
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l, Form of Payment m. Required Remarks
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4. Total only this Page \$ 480.00
F. T. Let a. S. & I. J. C. D.O. 1320. Pages Chies line must be on line 16 of Detailed Summary Page CRO-1100) \$ 480.00
L - Returned to Contributor M - Overpayment for Service N - Exceeded Contribution Limit
P* - Reimbursement of In-Kind O* Other * Codes require detailed explanation in required remarks field (m) Decem

Amendment